

ABW

ARREST SWORN COMPLAINT HOLD

EIGHTH JUDICIAL CIRCUIT

JUVENILE NOTICE TO APPEAR

ORIS NUMBER 0108067036		AGENCY CASE REPORT NUMBER 24-00-0527	
LIVINGSTON, CALEB LEE			
911 HOME ADDRESS (STREET, APARTMENT NUMBER, ETC.): [REDACTED]		CITY: HIGH SPRINGS	STATE: FL ZIP CODE: 32643 TELEPHONE NUMBER:
BUSINESS/SCHOOL ADDRESS (STREET, APARTMENT NUMBER, PO BOX, ETC.):		TELEPHONE NUMBER:	
MAILING ADDRESS (PO BOX, ETC. IF DIFFERENT THAN 911 ADDRESS):		SCARS, MARKS, TATTOOS, FACIAL HAIR, UNIQUE PHYSICAL FEATURES (LOCATION, TYPE, DESCRIPTION):	
RACE: <input checked="" type="checkbox"/> WHITE <input type="checkbox"/> AMERICAN INDIAN <input type="checkbox"/> BLACK <input type="checkbox"/> ASIAN / ORIENTAL		SEX: M	DATE OF BIRTH: 11/22/2004 HEIGHT: 5'09 HAIR COLOR: BROWN EYE COLOR: BROWN COMPLEXION: BUILD:
DRIVERS LICENSE / STATE ID NUMBER: L152112044220		STATE OF DL / ID: FL	SOCIAL SECURITY NUMBER: [REDACTED] PHOTO NUMBER: PLACE OF BIRTH: GAINESVILLE, FL. COUNTRY OF CITIZENSHIP: USA
SUBJECT'S OCCUPATION:		SPN NUMBER:	AGENCY ORI NUMBER: 0010400 SO ID / AGENCY ID / NUMBER: BOOKING NUMBER: 24-00-1518
LOCATION OF ARREST:		DATE OF ARREST: 08/29/2024	TIME OF ARREST (MILITARY): 15:19 DATE OF BOOKING: 08/29/24 TIME OF BOOKING (MILITARY): 1632
SUBJECT IDENTIFIED BY WHOM (VICTIM, WITNESS, LEO, ETC.): DAVIS, JAMES		SUBJECT'S NAME VERIFIED BY (PHOTO ID, FAMILY MEMBER, KNOWN TO OFFICER, ETC.): MCT	
CO TIME	#1 (NAME):	DATE OF BIRTH:	RACE: SEX: COURT NUMBER: <input type="checkbox"/> ARRESTED <input type="checkbox"/> SWORN COMPLAINT <input type="checkbox"/> NTA <input type="checkbox"/> FELONY <input type="checkbox"/> MISDEMEANOR <input type="checkbox"/> TRAFFIC CASE <input type="checkbox"/> JUVENILE: <input type="checkbox"/> YES <input type="checkbox"/> NO
	#2 (NAME):	DATE OF BIRTH:	RACE: SEX: COURT NUMBER: <input type="checkbox"/> ARRESTED <input type="checkbox"/> SWORN COMPLAINT <input type="checkbox"/> NTA <input type="checkbox"/> FELONY <input type="checkbox"/> MISDEMEANOR <input type="checkbox"/> TRAFFIC CASE <input type="checkbox"/> JUVENILE: <input type="checkbox"/> YES <input type="checkbox"/> NO
/ GUARDIAN (NOTIFIED <input type="checkbox"/> YES <input type="checkbox"/> NO):		WORK/TELEPHONE NUMBER:	
Case: 2024 MM 001781 A 00087493857 DKT: AF-A		012024mm001781A	
AGENT #, PO BOX, ETC.):		CITY:	STATE: ZIP CODE: HOME TELEPHONE NUMBER:
ADDRESS:		TELEPHONE NUMBER:	
#2 (NAME):		ADDRESS: TELEPHONE NUMBER:	
CHARGE	OFFENSE DESCRIPTION: SIMPLE BATTERY (DOMESTIC)	<input type="checkbox"/> FELONY <input checked="" type="checkbox"/> MISDEMEANOR <input type="checkbox"/> TRAFFIC <input type="checkbox"/> NTA	COMPLETE STATUTE / ORDINANCE NUMBER: 784-03 DOM VICTIM NOTIFICATION: ARREST: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO RELEASE: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
	<input type="checkbox"/> WARRANT <input type="checkbox"/> JUVENILE PU ORDER <input type="checkbox"/> CIVIL ORDER <input type="checkbox"/> CITATION <input type="checkbox"/> CAPIAS NUMBER:	DATE OF OFFENSE: 08/29/2024 TIME OF OFFENSE: 13:42 BAIL AMOUNT:	VICTIM'S TELEPHONE NUMBER: [REDACTED]
1	VICTIM (NAME):	ADDRESS (STREET, APARTMENT NUMBER, PO BOX, ETC.):	CITY: HIGH SPRINGS STATE: FL ZIP CODE: 32643
CHARGE	OFFENSE DESCRIPTION:	<input type="checkbox"/> FELONY <input type="checkbox"/> MISDEMEANOR <input type="checkbox"/> TRAFFIC <input type="checkbox"/> NTA	COMPLETE STATUTE / ORDINANCE NUMBER: VICTIM NOTIFICATION: ARREST: <input type="checkbox"/> YES <input type="checkbox"/> NO RELEASE: <input type="checkbox"/> YES <input type="checkbox"/> NO
	<input type="checkbox"/> WARRANT <input type="checkbox"/> JUVENILE PU ORDER <input type="checkbox"/> CIVIL ORDER <input type="checkbox"/> CITATION <input type="checkbox"/> CAPIAS NUMBER:	DATE OF OFFENSE: TIME OF OFFENSE: BAIL AMOUNT:	VICTIM'S TELEPHONE NUMBER:
2	VICTIM (NAME):	ADDRESS (STREET, APARTMENT NUMBER, PO BOX, ETC.):	CITY: STATE: ZIP CODE:
PROSECUTIVE SUMMARY	THE FOLLOWING INCIDENT OCCURRED AT (ADDRESS / LOCATION):		CITY OF: HIGH SPRINGS COUNTY OF: ALACHUA STATE OF: FLORIDA
	<p>On the listed date and time, I responded to the mentioned address in reference to a domestic battery. On arrival I spoke with the Reporting Party and the Victim. The Victim gave statement that the Offender had hit her to the left side of her face with his open right hand.</p> <p>I then spoke with the Offender and post Miranda he admitted to slapping the Victim because she said something about his mom. The two were also arguing concerning his cell phone. The Victim and Offender reside at the same residence as a family and have a child</p>		
NTA	<input type="checkbox"/> MANDATORY APPEARANCE IN COURT AT:		DATE OF APPEARANCE: TIME OF APPEARANCE: <input type="checkbox"/> AM <input type="checkbox"/> PM
	I AGREE AND PROMISE TO COMPLY AND ANSWER TO THE CHARGES AND INSTRUCTIONS SPECIFIED IN THIS NOTICE TO APPEAR. WILLFUL REFUSAL TO ACCEPT AND SIGN THIS NOTICE TO APPEAR MAY RESULT IN PHYSICAL ARREST. I UNDERSTAND MY SIGNATURE IS NOT AN ADMISSION OF GUILT OR WAIVER OF MY RIGHTS.		DEFENDANT (SIGNATURE): DATE:
JURAT	SWORN TO AND SUBSCRIBED BEFORE ME THIS:		I SWEAR THE ABOVE, AND REVERSE AND ATTACHED PAGES AND STATEMENTS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.
	DAY OF August 2024 SIGNATURE: [Signature] 4624 TITLE: LEO	NAME (PRINT): DAVIS, JAMES E. SIGNATURE: [Signature] AGENCY: HIGH SPRINGS POLICE DEPARTMENT LEO ID NUMBER: 3722	

ARREST SWORN COMPLAINT HOLD

JUVENILE NOTICE TO APPEAR

SUPPLEMENT EIGHTH JUDICIAL CIRCUIT

OBT'S NUMBER: _____

AGENCY ORI NUMBER: **0010400**

SPN NUMBER: _____

AGENCY CASE REPORT NUMBER: **24-00-0527**

NAME OF SUBJECT (LAST, FIRST, MI): **LIVINGSTON, CALEB LEE** ALIAS / MAIDEN: _____

RACE: WHITE AMERICAN INDIAN BLACK ASIAN / ORIENTAL
 SEX: **M** DATE OF BIRTH: **11/22/2004** HEIGHT: **5'09** WEIGHT: _____ JAIL NUMBER: _____ SO ID / AGENCY ID / NUMBER: _____

#3 (NAME): _____ ADDRESS: _____ TELEPHONE NUMBER: _____
 #4 (NAME): _____ ADDRESS: _____ TELEPHONE NUMBER: _____

CHARGE OFFENSE DESCRIPTION: _____ FELONY MISDEMEANOR TRAFFIC NTA COMPLETE STATUTE / ORDINANCE NUMBER: _____ VICTIM NOTIFICATION: ARREST: YES NO RELEASE: YES NO

WARRANT JUVENILE PU ORDER CIVIL ORDER CITATION DATE OF OFFENSE: _____ TIME OF OFFENSE: _____ BAIL AMOUNT: _____ VICTIM'S TELEPHONE NUMBER: _____

CAPIAS NUMBER: _____ VICTIM (NAME): _____ ADDRESS (STREET, APARTMENT NUMBER, PO BOX, ETC.): _____ CITY: _____ STATE: _____ ZIP CODE: _____

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CHARGE OFFENSE DESCRIPTION: _____ FELONY MISDEMEANOR TRAFFIC NTA COMPLETE STATUTE / ORDINANCE NUMBER: _____ VICTIM NOTIFICATION: ARREST: YES NO RELEASE: YES NO

WARRANT JUVENILE PU ORDER CIVIL ORDER CITATION DATE OF OFFENSE: _____ TIME OF OFFENSE: _____ BAIL AMOUNT: _____ VICTIM'S TELEPHONE NUMBER: _____

CAPIAS NUMBER: _____ VICTIM (NAME): _____ ADDRESS (STREET, APARTMENT NUMBER, PO BOX, ETC.): _____ CITY: _____ STATE: _____ ZIP CODE: _____

PROSECUTIVE SUMMARY - CONTINUED

in common. The Offender was placed under arrest for violation of F.S.S. 784.03 (3) Domestic Violence battery.

2024 AUG 30 AM 8:10
 J.A. "JESS" JAGG, ESQ.
 CLERK OF COURTS
 ALACHUA COUNTY, FL
 FILED
 OK 84